

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H95826**

(4)

1. Corporation Name

ROAD RUNNER MARKINGS, INC.

Principal Place of Business

~~P.O. BOX 2541-
CLEARWATER FL 34617-2541~~

Mailing Address

~~P.O. BOX 2541-
CLEARWATER FL 34617-2541~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1986

4. FEI Number

59-2656109

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 **2140 SUNNYDALE BLVD.**

Suite, Apt. #, etc.

22 **C**

City & State

23 **CLEARWATER, FLORIDA**

Zip

24 **33745-1209**

Country

25 **USA**

2a. Mailing Address

26 **2140 SUNNYDALE BLVD.**

Suite, Apt. #, etc.

27 **C**

City & State

28 **CLEARWATER, FLORIDA**

Zip

29 **33745-1209**

Country

30 **USA**

9. Name and Address of Current Registered Agent

**SEFCIK, JAMES W.
321 BELLEVUE BLVD.
BELLEAIR FL 34618-2018**

10. Name and Address of New Registered Agent

81 Name

SEFCIK, JAMES W.

82 Street Address (P.O. Box Number is Not Acceptable)

2140 SUNNYDALE BLVD. CLEARWATER

83

SUITE C

84 City

CLEARWATER, FLORIDA

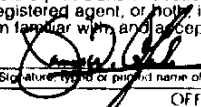
FL

85 Zip Code

33745-1209

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE


Signature of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

04-27-98

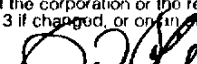
12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	PORTHOUSE, LISA A	
STREET ADDRESS	1151 MCFARLAND ST.	
CITY-ST-ZIP	DUNEDIN FL	
TITLE	ST	☐ DELETE
NAME	SEFCIK, JAMES W	
STREET ADDRESS	321 BELLEVUE BLVD.	
CITY-ST-ZIP	BELLEAIR FL 34618-2018	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	☒ Change ☒ Addition
1.2 NAME		
1.3 STREET ADDRESS	2140 SUNNYDALE BLVD. SUITE C	
1.4 CITY-ST-ZIP	CLEARWATER, FLORIDA 33745-1209	
2.1 TITLE	V/S/T/D	☐ Change ☒ Addition
2.2 NAME		
2.3 STREET ADDRESS	2140 SUNNYDALE BLVD. SUITE C	
2.4 CITY-ST-ZIP	CLEARWATER, FLORIDA 33745-1209	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  (**JAMES W. SEFCIK**)

04-27-98 **813-447-3428**

CR2E034 (10/97)